

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	1	1/6/00
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	1	1/5/00
FORMALITY REVIEW		<i>[Signature]</i>	2-2-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected
=	Allowed
—	(Through numeral)...	Canceled
÷	Restricted

N	Non-elected
I	Interference
A	Appeal
O	Objected

[illegible]

Claim	Date
Final Original	
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Claim		Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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